

1. CIR./DIST./DIV. CODE
TNW2. PERSON REPRESENTED
Dickerson, Koury

Case 2:05-cr-20353-SHM Document 49 Filed 11/14/05 Page 1 of 2 PageID 58

3. MAG. DKT./DEF. NUMBER	4. DIST. DKT./DEF. NUMBER 2:05-020353-003-Ma	5. APPEALS DKT./DEF. NUMBER	6. OTHER DKT. NUMBER
7. IN CASE/MATTER OF (Case Name) U.S. v. Dickerson	8. PAYMENT CATEGORY Felony	9. TYPE PERSON REPRESENTED Adult Defendant	10. REPR. REPRESENTATION TYPE (See Instructions) Criminal Case
11. OFFENSE(S) CHARGED (Cite U.S. Code, Title & Section) If more than one offense, list (up to five) major offenses charged, according to severity of offense. 1) 18 1028A.F -- FRAUD WITH IDENTIFICATION DOCUMENTS			

12. ATTORNEY'S NAME (First Name, M.I., Last Name, including any suffix) AND MAILING ADDRESS PARRIS, ROBERT 8 SOUTH THIRD ST 4TH FLOOR MEMPHIS TN 38103	13. COURT ORDER <input checked="" type="checkbox"/> O Appointing Counsel <input type="checkbox"/> F Subs For Federal Defender <input type="checkbox"/> P Subs For Panel Attorney Prior Attorney's Name: _____ Appointment Date: _____
Telephone Number: (901) 529-8500	<input checked="" type="checkbox"/> Because the above-named person represented has testified under oath or has otherwise satisfied this court that he or she (1) is financially unable to employ counsel and (2) does not wish to waive counsel, and because the interests of justice so require, the attorney whose name appears in Item 12 is appointed to represent this person in this case, or <input type="checkbox"/> Other (See Instructions) Signature of Presiding Judicial Officer or By Order of the Court 11/08/2005
14. NAME AND MAILING ADDRESS OF LAW FIRM (only provide per instructions)	Date of Order _____ Nunc Pro Tunc Date _____ Repayment or partial repayment ordered from the person represented for this service at time of appointment. <input type="checkbox"/> YES <input type="checkbox"/> NO

15. CLAIM FOR SERVICES AND EXPENSES IN COURT ONLY		16. CLAIM FOR SERVICES AND EXPENSES OUT OF COURT ONLY			
CATEGORIES (Attach itemization of services with dates)	HOURS CLAIMED	TOTAL AMOUNT CLAIMED	MATH/TECH ADJUSTED HOURS	MATH/TECH ADJUSTED AMOUNT	ADDITIONAL REVIEW
a. Arraignment and/or Plea					
b. Bail and Detention Hearings					
c. Motion Hearings					
d. Trial					
e. Sentencing Hearings					
f. Revocation Hearings					
g. Appeals Court					
h. Other (Specify on additional sheets)					
(Rate per hour = \$)	TOTALS:				
a. Interviews and Conferences					
b. Obtaining and reviewing records					
c. Legal research and brief writing					
d. Travel time					
e. Investigative and Other work (Specify on additional sheets)					
(Rate per hour = \$)	TOTALS:				
17. Travel Expenses (lodging, parking, meals, mileage, etc.)					
18. Other Expenses (other than expert, transcripts, etc.)					
GRAND TOTALS CLAIMED AND APPROVED					

19. CERTIFICATION OF ATTORNEY/PAYEE FOR THE PERIOD OF SERVICE FROM _____ TO _____	20. APPOINTMENT TERMINATION DATE IF OTHER THAN CASE COMPLETION	21. CASE DISPOSITION
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22. CLAIM STATUS Final Payment Interim Payment Number _____ Supplemental Payment
Have you previously applied to the court for compensation and/or reimbursement for this case? YES NO If yes, were you paid? YES NO
Other than from the court, have you, or to your knowledge has anyone else, received payment (compensation or anything of value) from any other source in connection with this representation? YES NO If yes, give details on additional sheets.

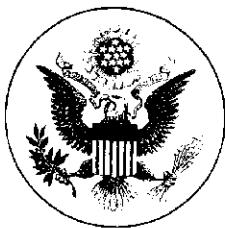
I swear or affirm the truth or correctness of the above statements.

Signature of Attorney: _____ Date: _____

23. IN COURT COMP.	24. OUT OF COURT COMP.	25. TRAVEL EXPENSES	26. OTHER EXPENSES	27. TOTAL AMT. APPR / CERT
28. SIGNATURE OF THE PRESIDING JUDICIAL OFFICER			DATE	28a. JUDGE / MAG. JUDGE CODE
29. IN COURT COMP.	30. OUT OF COURT COMP.	31. TRAVEL EXPENSES	32. OTHER EXPENSES	33. TOTAL AMT. APPROVED
34. SIGNATURE OF CHIEF JUDGE, COURT OF APPEALS (OR DELEGATE) Payment approved in excess of the statutory threshold amount.			DATE	34a. JUDGE CODE

This document entered on the docket sheet in compliance
with Rule 55 and/or 32(b) FRCrP on 11-15-05

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Notice of Distribution

This notice confirms a copy of the document docketed as number 49 in case 2:05-CR-20353 was distributed by fax, mail, or direct printing on November 15, 2005 to the parties listed.

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Honorable Samuel Mays
US DISTRICT COURT